

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			5-30-01
O.I.P.E. CLASSIFIER		412	6/5/01
FORMALITY REVIEW		1080	6/24/01
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

**BEST AVAILABLE COPY**

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If more than 150 claims or 10 actions  
 staple additional sheet here

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